

APPLICATION FOR BUILDING PERM

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

ER'S COMPENSATION DECLARATION

that I have a certificate of consent to self insure, of Workers' Compensation Insurance, or a certified ec. 3800, Lab. C.)

083806 Company STATE FUND

py is hereby furnished.

py is filed with the county building inspection

Applicant

STATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

ed not be completed if the permit is for one hundred r less.)

the performance of the work for which this permit ll not employ any person in any manner so as to to the Workers' Compensation Laws.

Applicant MIKE LUNA

APPLICANT: If, after making this Certificate of ou should become subject to the Workers' provisions of the Labor Code, you must forthwith h provisions or this permit shall be deemed revoked.

SED CONTRACTORS DECLARATION

that I am licensed under provisions of Chapter 9 with Section 7000) of Division 3 of the Business and le, and my license is in full force and effect.

518273 Lic. Class B
MIKE LUNA Date 5-4-92

under Sec.

this reason

Date:

of the property, or my employees with wages as mpensation, will do the work and the structure is d or offered for sale (Section 7044, Business and Code.)

of the property, am exclusively contracting with ntractors to construct the project (Section 7044, d Professions Code.)

ONSTRUCTION LENDING AGENCY

rm that there is a construction lending agency for nce of the work for which this permit is issued (Sec.

me

dress

I have read this application and state that the above is correct. I agree to comply with all county and State laws relating to building construction, and prize representatives of this County to enter upon ntigined property for inspection purposes.

Mike Luna 5/4/92
or Agent Date

FOR APPLICANT TO FILL IN			
BUILDING ADDRESS <u>336 McDONNELL AVE</u>			
CITY <u>EAST LA ANGELES</u>		ZIP	
SIZE OF LOT		NO. OF BLDGS. NOW ON LOT	
TRACT <u>4190</u>	BLOCK <u>29</u>	LOT NO. <u>N. 49' x 1</u>	
ASSESSOR MAP BOOK		PAGE	PARCEL
OWNER <u>OSCAR LUNA</u>		TEL. NO.	
ADDRESS <u>54ME</u>			
CITY		ZIP	
ARCHITECT OR ENGINEER		TEL. NO.	
ADDRESS			
CONTRACTOR <u>MIKE LUNA</u>		TEL. NO. <u>213 644-7760</u>	
ADDRESS <u>4306 SE. LAYMAN AVE</u>		LIC. NO. <u>518273</u>	
CITY <u>PICO RIVERA ST 9000</u>		LIC. CLASS <u>A</u>	
SQ. FT. SIZE	NO. OF STORES	NO. OF FAMILIES	
DESCRIPTION OF WORK <u>ROOF - NEW</u>		<input type="checkbox"/> NEW <input type="checkbox"/> ADD <input type="checkbox"/> ALTER <input checked="" type="checkbox"/> REPAIR <input type="checkbox"/> DEMOL <input type="checkbox"/> URM	
USE OF EXISTING BLDG.			
APPLICANT (PRINT)		TEL. NO.	
ADDRESS			
WILL THE APPLICANT OR FUTURE BUILDING OCCUPANT HANDLE A HAZARDOUS MATERIAL OR A MIXTURE CONTAINING A HAZARDOUS MATERIAL EQUAL TO OR GREATER THAN THE AMOUNTS SPECIFIED ON THE HAZARDOUS MATERIALS INFORMATION GUIDE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
WILL THE INTENDED USE OF THE BUILDING BY THE APPLICANT OR FUTURE BUILDING OCCUPANT REQUIRE A PERMIT FOR CONSTRUCTION OR MODIFICATION FROM THE SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (SCAQMD)? SEE PERMITTING CHECKLIST FOR GUIDELINES. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
I HAVE READ THE HAZARDOUS MATERIALS INFORMATION GUIDE AND THE SCAQMD PERMITTING CHECKLIST. I UNDERSTAND MY REQUIREMENTS UNDER THE LOS ANGELES COUNTY CODE, TITLE 2, CHAPTER 2.20 SECTIONS 2.20.100 THROUGH 2.20.140 CONCERNING HAZARDOUS MATERIALS REPORTING AND FOR OBTAINING A PERMIT FROM THE SCAQMD.			
OWNER OR AGENT			
P.C. FEE <u>48.75</u>	PERMIT FEE <u>49.25</u>		
	ISSUANCE FEE <u>16.50</u>		
INVESTIGATION FEE	TOTAL FEE <u>65.75</u>		

SEE REVERSE FOR EXPLANATORY LANGUAGE

BUILDING ADDRESS <u>336 L. McDONNELL AVE</u>			
LOCALITY <u>E LA</u>			
NEAREST CROSS ST. <u>Gratian</u>			
USE ZONE <u>R2</u>	MAP NO. <u>3217</u>		
SPECIAL CONDITIONS			
WITHIN 1000 FT. OF SCHOOL?			YES
DISTRICT <u>6</u>	GROUP <u>R3</u>	TYPE CONST. <u>F</u>	FIRE ZONE <u>III</u>
STATISTICAL CLASSIFICATION CLASS NO. <u>21</u> DWELL UNITS			APT
REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FR PROP LINE
FRONT P.L.			
SIDE P.L.			
SEWER MAP BK <u>K</u> PG <u>22</u>			
VALUATION \$ <u>1400 -</u>			
\$			
LDMA P/C #			
LDMA Perm #			
FINAL DATE <u>5-1-92</u>			
FINAL BY <u>[Signature]</u>			

VALIDATION